Volunteer Application





Contact Information		
Name:		
Date of Birth:		
Street Address;		
City ST ZIP Code;		
Home Phone;		
Cell Phone;		
E-Mail Address;		
Availability		
During which hours are you a	vailable for volunteer assignments?	
Weekday mornings	Weekend mornings	
Weekday afternoons		
Weekday evenings	Weekend evenings	
Do you have any Animal	Care Experience?	
If so, please provide details.	150	
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Why do you wish to vol	unteer at the Kingston Animal S	helter?
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Please provide at leas	st 2 personal references	
Name	Phone	
Name	Phone	
greement/consent		
rocedures set forth by th landbook.	ne shelter as outlined in the Volunteer Over	view as well as the Volunteer
Vould you authorize King	gston Animal Shelter to perform a C.O.R.I. (
Vould you authorize King	gston Animal Shelter to perform a C.O.R.I. (check? Yes No (please i	
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